NY STATE CLIENT SEMI-ANNUAL REPORT

Marking Instructions: Please type or use blue or black ink pen.

Il Client Information

Name: New York Housing Association, Inc.

Permanent Business Address: 634 Watervliet Shaker Road

Completely fill in one circle.

Print legible numbers and block letters, no script.

COMPLETE ALL SECTIONS

before submitting or form will be returned.

Year: 2012			
Fill in circle if ame	endment O		
Report Period:	O January/June	⊗ July/December	
Type of Lobbying:	⊗ Nonprocurement	O Procurement	OBoth
Client Filing Fee Ch	neck Number:		

FOR OFFICE USE ONLY	0
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RECEIVED JAN 15 200	
CK# 9518 50-	

Cit	y: Latham			State	e:NY		ZIP code:12110-3618	
Bu	siness Phone:518-86	7-3242		Fax	Numb	er: 518-867-3245		
ĺ		(see instructions): None						
1111	a rany beneath,							901
M	Lobbyist(s) In	formation & Con	npe	nsation (Cur	rent	Period Only)	U. S. L. Harrins	No.
An	y individual or organi	zation that has lobbied a	on be	ehalf of the client r zation.	nust b	e reported below,	regardless of whether the	
	Type of Lobbyist:		0	Employed	0	Designated		
^		State Lobbying	0	Local Lobbying	0	Both		
	Name: Greenberg			, ,		Phone Number:	518-689-1400	
	Address: 54 State St							
						State: NY	ZIP code:12207	
	City: Albany	r current period: \$37,5	500	.00		ordro.		
_			1 1822	Employed	0	Designated		
В	Type of Lobbyist:			Local Lobbying		Both		
		O State Lobbying		Local Lobbying		Phone Number:		j
	Name:					FITOTIE NOTTIDET.		
	Address:					II AND THE RESIDENCE	710	
	City:					State:	ZIP code:	
	Compensation fo	r current period: \$.00				_
C	Type of Lobbyist:	Retained	0	Employed	C	Designated		
	Level of Gov't:	O State Lobbying	0	Local Lobbying	C	Both		
	Name:					Phone Number:		
	Address:							
	City:					State:	ZIP code:	
		current period: \$.00				
0	Continued on attach						POST REPRESENTATION OF THE PROPERTY AND	and the last
D	TOTAL COMPENSA	ATION of ALL lobbyist	s fo	r current period		(A+B+C+addend	dum sheets): \$37,500 .0)

IV Other Expenses (Current Semi-A	nnual Perio	od Only)			
A Report in the aggregate all expenses less than a	or equal to \$75:		\$	0	.00
B Report in the aggregate all expenses for salaries			s: \$	0	.00
C Itemize each expense exceeding \$75:		75	,		0
PAID TO: None	DATE:		/	O Ad	O Social Event
PURPOSE:		JNT: \$.00	O *Ad	dendum attached
O PROCUREMENT O NONPROCUREMENT					
PAID TO:	DATE:		/	O Ad	O Social Event
PURPOSE:	AMO	UNT: \$.00	○ *Ac	ldendum attached
O PROCUREMENT O NONPROCUREMENT					
O Continued on attached pages		al contract	t attach the	addendum	nage listing the
# If any expense listed above exceeds \$75 expense, dollar amount attributable to the second	ne inalviauai ar	id the name	e, fille und c	inployer or	THE THIRD STATES
D Total expenses for current period: \$0	.00 (if	applicable,	include all ex	penses fror	n attached pages in total)
	The state of the s	THE RESERVE OF THE PARTY OF THE			an a solution and solution
V Source of Funding Disclosure				-t-tltl(a)	use Section A In the
Instructions: In the event only one person or enevent multiple persons or entities h					
A Below, list all Contributions receive received. If more than five Contrib					
Addendum for the additional Confi	tributions.	omgic coo.			
Contribution(s) from Single Source #1		Dille	SERS. I	NC	
Single Source Entity's Name: CHAYNP10	HOWE				
or Single Source Person's Last Name:		First	Name:		
Address: 755 W. BIG BEAVER ROAD)		2004		
City: TR64		Sta	te: M1		ZIP code: 4809
Phone: 248.614-8245				122	2 00
Date Contribution Received: / / 17 /			Contributio		323 .00
Date Contribution Received: 2/24/	, ~		Contributio		370 .00
Date Contribution Received: 3 / 15 /			Contributio		462 .00
Date Contribution Received: 4 / 13 /			Contributio		416 .00
Date Contribution Received: 4 / 13 /	, 50		Contributio	on: \$.231.00
Check here if using section V(C) of the Addendum	n for additional (Contributions	S:		
Contribution(s) Single Source #2					
Single Source Entity's Name: (ULONY	FACTURY	CRAF	TED HO	MES	
or Single Source Person's Last Name:			t Name:		
Address: 20 516 PAINT BLU	D				
City: SH IPPENVILLE		Sto	te: PA		ZIP code: 16254
Phone: 800-876-4870					
Date Contribution Received: 1/17	12012	Amount o	f Contribution	on: \$	508 .00
Date Contribution Received: 2 /24		Amount o	f Contributio	on: \$	323 .00
Date Contribution Received: 3 /21		Amount o	f Contribution	on: \$	277 .00
Date Contribution Received: 4/19		Amount o	f Contribution	on: \$	370.00
Date Contribution Received: 5/24		Amount o	f Contribution	on: \$	4 16 .00
Check here if using section V(C) of the Addendum		Contribution	s:		

Check here if there are Contribution(s) from Single Source(s) other than those listed above. Use Section V(A) of the Addendum to list all such Contributions:

Check here if using section V(C) of the Addendum for additional Contributions:

Please use the following addendum pages as continuation for the specified sections. If additional space is needed, please make a copy of this sheet.

V Source of Funding Disclosure

A Below, list all Contributions received from the Single Source. Include the date and the amount of the Contribution received.

100011001		
Contributions from Single Source #3	1	
Single Source Entity's Name: THE COMMUDOR	LE CORPORATION	
or Single Source Person's Last Name:	First Name:	
Address: Po Box 349		
City: CLARION	State: PA	ZIP code:/62/4
Phone: 814-224-9210		
Date Contribution Received: / 17 / 2012	Amount of Contribution: \$	1618 .00
Date Contribution Received: 2/16/2012	Amount of Contribution: \$	693.00
Date Contribution Received: 3 /21 / 2012	Amount of Contribution: \$	4/6 .00
Date Contribution Received: 4/19/2012	Amount of Contribution: \$	<i>6</i> 93 .00
Date Contribution Received: 5/24/2012	Amount of Contribution: \$	925.00
Check here if using section V(C) of the Addendum for additions	Il Contributions:	•
Contributions from Single Source #		
Single Source Entity's Name: EAGLE RIVER	HOMES, LLC	
or Single Source Person's Last Name:	First Name:	
Address: PO Bo & 336		27/17
City: LEULA	State: PA	ZIP code: 17540
Phone: 717-656-2381		
Date Contribution Received: 1 17 1 2012	Amount of Contribution: \$	370.00
Date Contribution Received: 2 / 24 / 2012	Amount of Contribution: \$	323.00
Date Contribution Received: 3 /21 / 2012	Amount of Contribution: \$	185 .00
Date Contribution Received: 1/19/2012	Amount of Contribution: \$	231.00
Date Contribution Received: 5/24/2012	Amount of Contribution: \$	462.00
Check here if using section V(C) of the Addendum for additional	al Contributions:	©
Contributions from Single Source #		
Single Source Entity's Name: FAIRMONT H	OMES	
Single Source Person's Last Name:	First Name:	
Address: Po Box 27		
City: NAPPANEE	State: 1 N	ZIP code: 44550
Phone: 574 - 773 - 79W1		
Date Contribution Received: 2/14/2012	Amount of Contribution: \$	187.00
Date Contribution Received: 3/9/2012	Amount of Contribution: \$	138'.00
Date Contribution Received: 4/9/2012	Amount of Contribution: \$	46.00
Date Contribution Received: 4/30/2012	Amount of Contribution: \$	277.00
Date Contribution Received: 57/31/2012	Amount of Contribution: \$	138.00

0

Please use the following addendum pages as continuation for the specified sections. If additional space is needed, please make a copy of this sheet.

Source of Funding Disclosure

Check here if using section V(C) of the Addendum for additional Contributions:

A Below, list all Contributions received from received.	the Single Source. Include the date and the o	amount of the Contribution
Contributions from Single Source #		
Single Source Entity's Name: MARLETTE	HOMES, ING	
or Single Source Person's Last Name:	First Name:	
Address: POBOX 947		
City: LEWIS TOWN	State: P.A	ZIP code: 1704L
Phone: 717 - 248 - 5171		(0.11.0)
Date Contribution Received: 1 / 10 / 2016		1248.00
Date Contribution Received: 2/16/201		1480 .00 1063 .00
Date Contribution Received: 3/15/201		693.00
Date Contribution Received: 4/13/201		740.00
Date Contribution Received: 5/10/20/		A
Check here if using section V(C) of the Addendum for ad	dditional Contributions:	0
Contributions from Single Source #		
Single Source Entity's Name: RITZ-CRAFT	CORPORATION OF PA	
or Single Source Person's Last Name:	First Name:	
Address: 15 INDUSTRIAL PARK	ROAD	120 17.1
City: IMIFIELINBURG	State: PA	ZIP code: 12844
Phone: 570 -966-5107		DAY MASSE
Date Contribution Received: 17120	Amount of Contribution: \$	185 .00
Date Contribution Received: 2/24/201	Amount of Contribution: \$	46.00
Date Contribution Received: 2116120	(2 Amount of Contribution: \$	138 .00
Date Contribution Received: 4/19/20		92.00
Date Contribution Received: 41261201	Amount of Contribution: \$	92 .00
Check here if using section V(C) of the Addendum for ac	dditional Contributions:	<u> </u>
Contributions from Single Source #		
Single Source Entity's Name: SKYLINE C	LORPURATION	
or	First Name:	
Single Source Person's Last Name: Address: 2520 84 PASS ROAD		
City: ELKHART	State: //	ZIP code: 44575
Phone: 574 -294-4521		
Date Contribution Received: 1 124 1 20	Amount of Contribution: \$	462.00
Date Contribution Received: 2124130	Amount of Contribution: \$	138.00
Date Contribution Received: 3/21/20	12 Amount of Contribution: \$	138.00
Date Contribution Received: 4/19/20		462.00
Date Contribution Received: 5/17/20	A STATE OF THE PARTY OF THE PAR	462.00

Please use the following addendum pages as continuation for the specified sections. If additional space is needed, please make a copy of this sheet.

V Source of Funding Disclosure

Instructions:

Below, list all Contributions received from the Single Source or, if applicable, the Related, Affiliated Entity or Person. Include the date of the Contribution received and the amount of the Contribution.

C Single Source Information for one Person or Entity for a single Contribution.

C Single Source Information for one Person of Entity for a single Community.								
Contributions from Single Source # Pg 2								
Single Source (or Related or Affiliated) Entity's Name: CHAMPION HOME BUILDER, INC.								
or Single Source (or Related or Affil	iated)Person's Last Name	e: First Nan	ne;					
Address: 755 W. B. 6	BEAVER ROAD		, ian Old					
City: TROY		State: M	ZIP code: 48084					
Phone: 248 - 414 - 824	5							
Date Contribution Received:	4/26/2012	Amount of Contribution: \$	643.00					
Date Contribution Received:	5/17/2012	Amount of Contribution: \$	925.00					
Date Contribution Received:	6/15/2012	Amount of Contribution: \$	447.00					
Date Contribution Received:	7/11/2012	Amount of Contribution: \$	83 2.00					
Date Contribution Received:	8/14/2012	Amount of Contribution: \$	1757.00					
Date Contribution Received:	8/20/2012	Amount of Contribution: \$	37.00					
Date Contribution Received:	9/17/2012	Amount of Contribution: \$	1248.00					
Date Contribution Received:	10/10 /2012	Amount of Contribution: \$	447.00					
Date Contribution Received:	11/19/2012	Amount of Contribution: \$	693.00					
Date Contribution Received:	12/18/2012	Amount of Contribution: \$	740.00					
Date Contribution Received:	1/12/2012	Amount of Contribution: \$	370.00					
Date Contribution Received:	2/14/2012	Amount of Contribution: \$	185.00					
Date Contribution Received:	3/15/2012	Amount of Contribution: \$	138.00					
Date Contribution Received:	4/13/2012	Amount of Contribution: \$	138 .00					
Date Contribution Received:	5/17/2012	Amount of Contribution: \$	92.00					
Date Contribution Received:	6/20/2012	Amount of Contribution: \$	46.00					
Date Contribution Received:	7/11/2012	Amount of Contribution: \$	323 .00					
Date Contribution Received:	8/14/2012	Amount of Contribution: \$	185 .00					
Date Contribution Received:	9/17/2012	Amount of Contribution: \$	277.00					
Date Contribution Received:	10/10/2012	Amount of Contribution: \$	185 .00					
Date Contribution Received:	111 101 2012	Amount of Contribution: \$	277.00					
Date Contribution Received:	12/13/2012	Amount of Contribution: \$	231.00					
Date Contribution Received:	1/13/2012	Amount of Contribution: \$	50B .00					
Date Contribution Received:	2124 12012	Amount of Contribution: \$	508 .00					
Date Contribution Received:	212912012	Amount of Contribution: \$	555.00					
Date Contribution Received:	6/15/2012	Amount of Contribution: \$	1/10.00					
Date Contribution Received:	9/17/2012	Amount of Contribution: \$	1526.00					
Date Contribution Received:	10/10 /2012	Amount of Contribution: \$	1341 .00					

Please use the following addendum pages as continuation for the specified sections. If additional space is needed, please make a copy of this sheet.

V Source of Funding Disclosure

Instructions:

Below, list all Contributions received from the Single Source or, if applicable, the Related, Affiliated Entity or Person. Include the date of the Contribution received and the amount of the Contribution.

C Single Source Information for one Person or Entity for a single Contribution.

C Single Source Information for one Person or Entity for a single Contribution.						
Contributions from Single Source # Pq 3						
Single Source(or Related or Affiliated) Entity's No	IME: CHAMPION HOME BUILDER, INC					
or Single Source (or Related or Affiliated)Person's I	ast Name: First Name:					
Address: 755 W. BIG BEAVER	ROAD					
City: TROY	State: M1 ZIP code: 4804					
Phone: 248-614-8265						
Date Contribution Received: 12/4/5	100					
Date Contribution Received: 1/12/						
Date Contribution Received: 2/10/3	COLA AMOUNT OF COMMODITION 4					
Date Contribution Received: 3/15/	2012 Amount of Commodition.					
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Date Contribution Received: 5/17/2						
Date Contribution Received: (2/15/3						
Date Contribution Received: 7/11/5						
Date Contribution Received: 8/14/15						
Date Contribution Received: 9 / 12 /2						
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Please use the following addendum pages as continuation for the specified sections. If additional space is needed, please make a copy of this sheet.

Source of Funding Disclosure

Instructions:

Below, list all Contributions received from the Single Source or, if applicable, the Related, Affiliated Entity or Person. Include the date of the Contribution received and the amount of the Contribution.

Single Source Information for one Person or Entity for a single Contribution.

C Single Source Inform	nation for one Person or Entity	y for a single Contribution.	
Contributions from Single Source	#2		5 99
Single Source(or Related or Affilia	ated) Entity's Name: C	OLONY FACTORY CA	PAFTED HOMES
or Single Source (or Related or Affil			9
Address: 20510 PAINT			
City: SHIPPENVILLE		State: PA	ZIP code: 16254
Phone: 800-874-487			
	612012012	Amount of Contribution: \$	462 .00
	7/20/2012	Amount of Contribution: \$	555.00
Date Contribution Received:	8/17/2012	Amount of Contribution: \$	390.00
A SERVICE OF THE RESIDENCE OF THE PROPERTY OF	9/17/2012	Amount of Contribution: \$	277 .00
Date Contribution Received:	1012512012	Amount of Contribution: \$	647.00
Date Contribution Received:	11/19/2012	Amount of Contribution: \$	323.00
Date Contribution Received:	12/18/2012	Amount of Contribution: \$	401.00
Date Contribution Received:	/ /	Amount of Contribution: \$.00
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Source of Funding Disclosure

Below, list all Contributions received from the Single Source or, if applicable, the Related, Affiliated Entity or Person. Include the date of the Contribution received and the amount of the Contribution. Instructions:

C Single Source Inform	nation for one Person or	Entity for a single Contribution.	
Contributions from Single Source	#3		
Single Source(or Related or Affili	iated) Entity's Name:	THE COMMODORE CO	RPORATION Pgc
or Single Source (or Related or Affi	liated)Person's Last N	Name: First No	ime:
Address: Po Box 349			
City: CLARION		State: PA	ZIP code:16214
Phone: 814-224-92	i D		150
	61201201	Amount of Contribution: \$	1387.00
	7/20/2012	Amount of Contribution: \$	7173 .00
Date Contribution Received:	8117 12012	Amount of Contribution: \$	647.00
Date Contribution Received:	9/21/2012	2 Amount of Contribution: \$	1665 .00
Date Contribution Received:	10/19/2018	Amount of Contribution: \$	2358.00
Date Contribution Received:	11/19/201		1341 .00
Date Contribution Received:	12/21/2017	Amount of Contribution: \$	8 ? 8 .00
Date Contribution Received:	/ /	Amount of Contribution: \$.00
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V Source of Funding Disclosure
Instructions:

Below, list all Contributions received from the Single Source or, if applicable, the Related, Affiliated Entity or Person.
Include the date of the Contribution received and the amount of the Contribution.

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C Single Source Information for one Person or Entity for a single Contribution.							
Contributions from Single Source	#						
Single Source(or Related or Affilia	ated) Entity's Name: EA	GLE RIVER HOMES	LLC pg 2				
or Single Source (or Related or Affili							
Address: PU BUY 336							
City: LEOLA		State: P.4	ZIP code:17540				
Phone:							
Date Contribution Received:	612012012	Amount of Contribution: \$	231.00				
Date Contribution Received:	7/3//2012	Amount of Contribution: \$	/38 .00				
The contract of the contract o	8 130 12012	Amount of Contribution: \$	555 .00				
1	9/17/2012	Amount of Contribution: \$	277 .00				
	10/19/2012	Amount of Contribution: \$	740.00				
Date Contribution Received:	11/19/2012	Amount of Contribution: \$	740.00				
Date Contribution Received:	12/18/2012	Amount of Contribution: \$	462.00				
Date Contribution Received:	/	Amount of Contribution: \$.00				
Date Contribution Received:	/- /	Amount of Contribution: \$.00				
Date Contribution Received:	/ /	Amount of Contribution: \$.00				
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Please use the following addendum pages as continuation for the specified sections. If additional space is needed, please make a copy of this sheet.

Source of Funding Disclosure

Instructions:

Below, list all Contributions received from the Single Source or, if applicable, the Related, Affiliated Entity or Person. Include the date of the Contribution received and the amount of the Contribution.

C Single Source Info	ormation for one P	erson or Er	ntity for a single Contrib	oution.		
Contributions from Single Sour	ce # <u>5</u>					
Single Source(or Related or Af		Name:	FAIRMONT	HOMES	79	>
or Single Source (or Related or A				First Name	9.6	
Address: PO Box 27	7, 3,000,000			That I valid		
City: NAPPANEE			State: /	1.1	7IP coc	le:46550
Phone: 574-773-7	941			.0		4,000
Date Contribution Received:		2012	Amount of Cont	ribution: \$	231	.00
Date Contribution Received:	8.1101	1000	Amount of Cont	ribution: \$	9.2	
Date Contribution Received:	2 301		Amount of Cont	ribution: \$	231	.00
Date Contribution Received:	951281		Amount of Cont	ribution: \$	138	
Date Contribution Received:	101311		Amount of Conti	ribution: \$	185	
Date Contribution Received:	11/29/	2012	Amount of Contr	ribution: \$.00
Date Contribution Received:	12/28/	2012	Amount of Contr	ribution: \$	92	.00
Date Contribution Received:	/ /		Amount of Contr	ribution: \$.00
Date Contribution Received:	1 1		Amount of Contr	ribution: \$.00
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Please use the following addendum pages as continuation for the specified sections. If additional space is needed, please make a copy of this sheet.

V Source of Funding Disclosure

Instructions: Below, list all Contributions received from the Single Source or, if applicable, the Related, Affiliated Entity or Person. Include the date of the Contribution received and the amount of the Contribution.

C Single Source Information for one Person or Entity for a single Contribution.

C Single Source Information for one Person or Entity for a single Contribution.						
Contributions from Single Source #						
Single Source (or Related or Affiliated) Entity's Name: MARLETTE HOMES, INC Pg 2						
or Single Source (or Related or Affiliated)Person's Last Name: First Name:						
Address: Po Box 947						
City: LEWISTOWN			State: P.A	ZIP code:17044		
Phone: 717-248-51	71					
Date Contribution Received:	61 15	12012	Amount of Contribution: S	462.00		
Date Contribution Received:	7/11	1 2012	Amount of Contribution: 5	740.00		
Date Contribution Received:	8114	12012	Amount of Contribution: S	32.3 .00		
Date Contribution Received:	9/12	12012	Amount of Contribution: S			
Date Contribution Received:	101 10	12012	Amount of Contribution: \$	1526 .00		
Date Contribution Received:	11/9	12012	Amount of Contribution: 3	740 .00		
Date Contribution Received:	1119	12012	Amount of Contribution: 9	3 70 .00		
Date Contribution Received:	12/6	12012	Amount of Contribution: \$	508.00		
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Date Contribution Received:	/	/	Amount of Contribution: \$.00		
Date Contribution Received:	/	/	Amount of Contribution: \$.00		
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Source of Funding Disclosure

Instructions:

Below, list all Contributions received from the Single Source or, if applicable, the Related, Affiliated Entity or Person. Include the date of the Contribution received and the amount of the Contribution.

C Single Source Information for one Person or Entity for a single Contribution.						
Contributions from Single Source #						
Single Source (or Related or Affiliated) Entity's Name: RITZ-CRAFT CORPORATION of P.A pg Z						
or Single Source (or Related or Affiliated)Person's Last Name: First Name:						
Address: 15 INDUSTRIAL PARK ROAD						
City: MIFFLIN BUR		State: P.A	ZIP code: 17844			
Phone: 570 - 966 - 51	07					
Date Contribution Received:	5/24/2012	Amount of Contribution: \$	92 .00			
Date Contribution Received:	6/15/2010	Amount of Contribution: \$	416 .00			
Date Contribution Received:	7 12012012	Amount of Contribution: \$	414 .00			
Date Contribution Received:	813012012	Amount of Contribution: \$	92 .00			
Date Contribution Received:	9117 12012	Amount of Contribution: \$	277 .00			
Date Contribution Received:	10/19/2012	Amount of Contribution: \$	138 .00			
Date Contribution Received:	11/19/2012	Amount of Contribution: \$	370.00			
Date Contribution Received:	12/21/2012	Amount of Contribution: \$	138 .00			
Date Contribution Received:	/ /	Amount of Contribution: \$.00			
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V Source of Funding Disclosure

Below, list all Contributions received from the Single Source or, if applicable, the Related, Affiliated Entity or Person. Include the date of the Contribution received and the amount of the Contribution. Instructions:

C Single Source Inform	ation for one Person or Entity	y for a single Contribution.	
Contributions from Single Source			8
Contributions from Single Source	rted) Entity's Name: SI	KYLINE CORPORATIO	on ps2
2,400,00 0 ,000			
or Single Source (or Related or Affili	ated Person's Last Name	9.	
Address: 2520 BYPASS	ICO AD	State: 1N	ZIP code: 46 575
City: ELK HART		sidie. (10	
Phone: 574 - 294-650	1 , 20 , 20 , 2	Amount of Contribution: \$	353 .00
Date Contribution Received:	612012012	Amount of Contribution: \$	555.00
Date Contribution Received:	7/30/2012	Amount of Contribution: \$	786 .00
	812012012	Amount of Contribution: \$	508.00
Date Contribution Received:	9/17/2012	Amount of Contribution: \$	138 .00
Date Contribution Received:	101 19 12012	Amount of Contribution: \$	555.00
Date Contribution Received:	1111912012	Amount of Contribution: \$	740.00
Date Contribution Received:	1211812012	Amount of Contribution: \$.00
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VI Subjects lobbied:	VII Person, State Agency, Municipality or Legislative Body lobbied:				
Issues related to the manufactured/modular housing industry	Senate, Division of Housing and Community Relations, NYS DOT				
Continued on attached pages	Continued on attached pages				
vu Bill. Rule. Regulation, Rate Number or brief	VIII Title and Identifying Numbers of procurement contracts/documents lobbied:				
VII Bill, Rule, Regulation, Rate Number or brief description relative to the introduction or intended introduction of legislation or a resolution on which you lobbied:	contracts/documents lobbled:				
A5029, S3177, S4126, Potential regulatory amendments related to the transportation of manufactured homes	None				
O Continued on attached pages	Continued on attached pages				
IX Number or Subject Matter of Executive Order of Governor/Municipality lobbied:	X Subject Matter of and Tribes involved in tribal-state compacts, etc lobbied:				
	None				
None					
O Continued on attached pages	O Continued on attached pages				
XI Declaration					
This Declaration must be signed by the Chief Administrative reason, does not sign, he/she must duly designate another	harson to sign this Decidion. 13cc hishochors.				
I declare under penalty of perjury that the information correct, and complete to the best of my knowle	dge and belief.				
X SIGNATURE: Chary I Seen	DATE: () Unwary 14, 20.13				
PRINT NAME: LAST Geer FIRST Nancy					
TITLE: Executive Director					
Mark One: © Chief Administrative Officer © Designee(Attach Letter)					
The following MUST be attached to this repor	T of the time of submission.				

- --You must attach a \$50 dollar filing fee to each semi-annual report. (No fee is required for amendments to the original)
- --If applicable, a designation letter if you have marked designee in section XI.
- --If applicable, continuation sheets for sections III,IV,V,VI,VII,VIII,IX and X.

PLEASE NOTE You may be assessed up to \$25 for each day this report is late.